

Michelle Lujan Grisham Governor

Howie C. Morales
Lt. Governor

# NEW MEXICO ENVIRONMENT DEPARTMENT

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James C. Kenney
Cabinet Secretary

Jennifer J. Pruett
Deputy Secretary

Certified Mail-Return Receipt Requested

June 21, 2019

Mr. Robert Towle, Operations Foreman New Mexico Water Service Company 401 Horner Street Belen, New Mexico 87002

RE: New Mexico Water Service Company; Rio Communities Wastewater Treatment Facility; Minor Facility; NPDES Permit No. NM0027782; NPDES Compliance Evaluation Inspection; June 4, 2019

Dear Mr. Towle:

Enclosed please find a copy of the report and check list for the referenced inspection that the New Mexico Environment Department (NMED) conducted at your facility on behalf of the U. S. Environmental Protection Agency (USEPA). This inspection report will be sent to the USEPA in Dallas for their review. These inspections are used by USEPA to determine compliance with the National Pollutant Discharge Elimination System (NPDES) permitting program in accordance with the requirements of the federal Clean Water Act.

Further explanations are provided with the check list and discuss issues that should be addressed. The introduction and treatment scheme are also included with this inspection report.

You are encouraged to review the inspection report, required to correct any issues noted during the inspection, and advised to modify your operation and/or administrative procedures as appropriate. If you have comments on or concerns with the basis for the findings in the NMED inspection report, please contact us (see address below) in writing within 30 days from the date of this letter. Further, you are encouraged to notify in writing USEPA and NMED regarding modifications and compliance schedules at the address below:

David Long, NPDES Enforcement Coordinator Environmental Protection Agency, Region 6 NPDES Enforcement Branch (6EN-WM 1445 Ross Avenue, Suite 1200 Dallas, Texas 75202-2733 Sarah Holcomb, Program Manager New Mexico Environment Dept. Surface Water Quality Bureau Point Source Regulation Section PO Box 5469 Santa Fe, New Mexico 87502 NM Water Service Company/Rio Del Oro June 17, 2019 Page -2-

David Long (<u>Long.David@epa.gov</u>) is USEPA Region 6's NPDES Enforcement Coordinator at the above address. If you have any questions about this inspection report, please contact Sandra Gabaldon at 505-827-1041 or <u>Sandra.gabaldon@state.nm.us</u>

Sincerely,

Sarah Holcomb, Program Manager Point Source Regulation Section Surface Water Quality Bureau

Cc: Carol Peters-Wagnon, USEPA (6EN-WM via email David Long, USEPA (6EN-WM) via email Nancy Williams, USEPA (6EN-WC) via email Amy Andrews, USEPA (6EN-WM) via email David Esparza, USEPA (6EN-WM) via email Brent Larson, USEPA (6WQ-PP) via email John Rhoderick, Manager, District I via email

Form Approved OMB No. 2040-0003 Approval Expires 7-31-85



| NPDES Compliance Inspection Report   |   |         |      |                 |          |        |          |   |   |              |         |        |                        |                                      |       |          |        |               |               |                   |        |      |     |                      |        |       |         |   |    |
|--|---|---------|------|-----------------|----------|--------|----------|---|---|--------------|---------|--------|------------------------|--------------------------------------|-------|----------|--------|---------------|---------------|-------------------|--------|------|-----|----------------------|--------|-------|---------|---|----|
| Section A: National Data System Coding   |   |         |      |                 |          |        |          |   |   |              |         |        |                        |                                      |       |          |        |               |               |                   |        |      |     |                      |        |       |         |   |    |
| Transaction Code         NPDES           1         N         2         5         3         N         M         0         0         2         7         7   |   |         |      |                 |          |        |          | 8 2                                     |   |              |         | 1      | yr/mo/day<br>9 0 6 0 4 |                                      |       |          |        |               | Ins<br>18     | - i (             |        |      |     | Fac Type             |        |       |         |   |    |
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| L  | Ins   | specti  | on \ | Work [          | Days     |        | -        | F                                       | acility                                 | Evalua       | ation F | Rating |                        | <u> </u>                             | ВІ    | <u> </u> |        |               |               |                   |        |      |     | Reserved             |        |       |         |   |    |
|  | 67  |         |      | 1               | 69       |        |          |   | 70                                      | 3            |         |        |                        | 71                                   | N     | 72       | N      | 73            |               |                   | 74     | 75   |     |                      |        |       |         |   | 80 |
|  | Section B: Facility Data  |         |      |                 |          |        |          |   |   |              |         |        |                        |                                      |       |          |        |               |               |                   |        |      |     |                      |        |       |         |   |    |
| Nar  | Name and Location of Facility Inspected (For industrial users discharging to POTW, also |         |      |                 |          |        |          |   |   |              |         |        |                        |                                      |       |          |        |               |               |                   |        |      |     |                      |        |       |         |   |    |
| include POTW name and NPDES permit number)   |   |         |      |                 |          |        |          |   |   |              |         | ,      |                        |                                      |       |          |        |               |               |                   |        |      |     |                      |        |       |         |   |    |
| In Belen, go east on NM309 (Renken Ave.) right on NM 7 for ¼ mile, right on NM 304 for 1 mile to Vista Grande Estates and turn right into subdivision on Chisam Road. Facility is at the end of Chisam Road on the left side  1140 Hours / June 4, 2019 Exit Time/Date |   |         |      |                 |          |        |          |   |   |              |         | 3      |                        | June 1, 2014  Permit Expiration Date |       |          |        |               |               |                   |        |      |     |                      |        |       |         |   |    |
| tne  | ena c   | or Chis | sam  | i Koad          | on th    | е іеп  | siae     |   |   | VALE         | NCIA    | COU    | NTY                    |                                      |       |          |        | 0 Hou         |               |                   | 201    | 0    |     | May 31, 2019         |        |       |         |   |    |
|  |   |         |      | te Rep          |          |        |          |   | /Phon                                   | e and        | Fax N   | umbe   | r(s)                   |                                      |       |          | 130    | 0 1100        | 115/0         | une 4             | , 201  | 9    | Oth | ner Fa               |        |       |         |   |    |
| Byro   | n Pe  | eters,  | Lev  | el IV C         | Certifie | ed Ope | erato    | r                                       |   |              |         |        |                        |                                      |       |          |        |               |               |                   |        |      | SIC | 2 4952               | 2      |       |         |   |    |
|  | Name, Address of Responsible Official/Title/Phone and Fax Number  N 34.63396            |         |      |                 |          |        |          |   |   |              |         |        |                        |                                      |       |          |        |               |               |                   |        |      |     |                      |        |       |         |   |    |
|  |   |         |      | eneral<br>Opera |          |        | nan      |   |   |              |         |        |                        |                                      |       |          |        |               | Con           | tacted            | l      | 1    |     | -106.7               |        |       |         |   |    |
|  |   | er St   |      | :<br>:o 870     | 02       |        |          |   |   |              |         |        |                        |                                      |       |          | Yes    | : <u>L</u>    |               | No                | *      | J    |     |                      |        |       |         |   |    |
|  | Section C: Areas Evaluated During Inspection  |         |      |                 |          |        |          |   |   |              |         |        |                        |                                      |       |          |        |               |               |                   |        |      |     |                      |        |       |         |   |    |
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| S  |   |         |      | eports          |          |        | <b>—</b> | S                                       |   | -Moni        |         |        |                        |                                      | S     |          | udge   |               | •             | Dispo             | sal    |      | N   | Pollution Prevention |        |       |         |   |    |
| S Facility Site Review N Compliance Sch S Effluent/Receiving Waters S Laboratory   |   |         |      |                 |          |        |          | nedul                                   | es                                      |              | N       | 1      | retrea                 |                                      |       |          |        |               | N<br>N        | Multimedia Other: |        |      |     |                      |        |       |         |   |    |
| S  | En  | nuen    | /Ke  | eceivir         | ig wa    | ters   |          |   | on D:                                   | Sumn         |         | f Find | dinas                  |                                      |       |          | orm V  |               |               | hoote             | e if n | 0000 |     | Otne                 | er:    |       |         |   |    |
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|  | Pie   | ease    | see  | chec            | klist a  | ind tu | rther    | exp                                     | lanati                                  | ons to       | r deta  | ils of | tindii                 | ngs                                  |       |          |        |               |               |                   |        |      |     |                      |        |       |         |   |    |
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| Name(s) and Signature(s) of Inspector(s)  Agency/Office/Telephone/Fax  Date  |   |         |      |                 |          |        |          |   |   |              |         |        |                        |                                      |       |          |        |               |               |                   |        |      |     |                      |        |       |         |   |    |
| Sandra Gabaldon  |   |         |      |                 |          |        |          | NMED/SWQB/(505) 827-1041/(505) 827-0160 |   |              |         |        |                        |                                      |       |          |        | June 21, 2019 |               |                   |        |      |     |                      |        |       |         |   |    |
|  |   |         |      |                 |          |        |          |   |   |              |         |        |                        |                                      |       |          |        |               |               |                   |        |      |     |                      |        |       |         |   |    |
| Sig  | natu  | re of   | Ma   | nagen           | nent C   | A Re   | view     | er                                      |   |              |         | Age    | ency/0                 | Office                               | e/Pho | ne ar    | nd Fax | Nun           | nbers         |                   |        |      |     | Da                   | te     |       |         |   |    |
| Sarah Holcomb, Program Manager   |   |         |      |                 |          |        |          | NM                                      | NMED/SWQB/(505) 827-2897/(505) 827-0160 |              |         |        |                        |                                      |       |          |        |               | June 21, 2019 |                   |        |      |     |                      |        |       |         |   |    |

| New Mexico Water Service Company – Rio Communities  | PERMIT NO. NM0027782             |  |  |  |  |  |  |  |
|---|----------------------------------|--|--|--|--|--|--|--|
| SECTION A – PERMIT VERIFICATION   |                                  |  |  |  |  |  |  |  |
| PERMIT SATISFACTORILY ADDRESSES OBSERVATIONS  M S M U NA (FURTHER ED)  DETAILS:   | EXPLANATION ATTACHED <u>NO</u> ) |  |  |  |  |  |  |  |
| 1. CORRECT NAME AND MAILING ADDRESS OF PERMITTEE  | ⊠y□n □na                         |  |  |  |  |  |  |  |
| 2. NOTIFICATION GIVEN TO EPA/STATE OF NEW DIFFERENT OR INCREASED DISCHARGES   | □ y □ n ⊠ na                     |  |  |  |  |  |  |  |
| 3. NUMBER AND LOCATION OF DISCHARGE POINTS AS DESCRIBED IN PERMIT   | ⊠ y □ n □ na                     |  |  |  |  |  |  |  |
| 4. ALL DISCHARGES ARE PERMITTED   | ⊠ y □ n □ na                     |  |  |  |  |  |  |  |
| SECTION B – RECORDKEEPING AND REPORTING EVALUATION  |                                  |  |  |  |  |  |  |  |
| RECORDS AND REPORTS MAINTAINED AS REQUIRED BY PERMIT. $\boxtimes$ S $\square$ M $\square$ U $\square$ NA (Further Details:                                      | EXPLANATION ATTACHED <u>NO</u> ) |  |  |  |  |  |  |  |
| 1. ANALYTICAL RESULTS CONSISTENT WITH DATA REPORTED ON DMRs.  | ⊠y □n □nA                        |  |  |  |  |  |  |  |
| 2. SAMPLING AND ANALYSES DATA ADEQUATE AND INCLUDE.   | ⊠s □m □u □na                     |  |  |  |  |  |  |  |
| a) DATES, TIME(S) AND LOCATION(S) OF SAMPLING   | ⊠ y □ n □ na                     |  |  |  |  |  |  |  |
| b) NAME OF INDIVIDUAL PERFORMING SAMPLING   | ⊠ y □ n □ na                     |  |  |  |  |  |  |  |
| c) ANALYTICAL METHODS AND TECHNIQUES.   | ⊠ y □ n □ na                     |  |  |  |  |  |  |  |
| d) RESULTS OF ANALYSES AND CALIBRATIONS.  | ⊠ y □ n □ na                     |  |  |  |  |  |  |  |
| e) DATES AND TIMES OF ANALYSES.   | ⊠ y □ n □ na                     |  |  |  |  |  |  |  |
| f) NAME OF PERSON(S) PERFORMING ANALYSES.   | ⊠y□n □na                         |  |  |  |  |  |  |  |
| 3. LABORATORY EQUIPMENT CALIBRATION AND MAINTENANCE RECORDS ADEQUATE.   | ⊠s □m □u □na                     |  |  |  |  |  |  |  |
| 4. PLANT RECORDS INCLUDE SCHEDULES, DATES OF EQUIPMENT MAINTENANCE AND REPAIR.  | ⊠s □m □u □na                     |  |  |  |  |  |  |  |
| 5. EFFLUENT LOADINGS CALCULATED USING DAILY EFFLUENT FLOW AND DAILY ANALYTICAL DATA.  | ⊠ y □ n □ na                     |  |  |  |  |  |  |  |
| SECTION C – OPERATIONS AND MAINTENANCE  |                                  |  |  |  |  |  |  |  |
| TREATMENT FACILITY PROPERLY OPERATED AND MAINTAINED.  |                                  |  |  |  |  |  |  |  |
| 1. TREATMENT UNITS PROPERLY OPERATED.   | ⊠s □m □u □na                     |  |  |  |  |  |  |  |
| 2. TREATMENT UNITS PROPERLY MAINTAINED.   | □s⊠m □u □na                      |  |  |  |  |  |  |  |
| 3. STANDBY POWER OR OTHER EQUIVALENT PROVIDED .   | ⊠s □ m □ u □ na                  |  |  |  |  |  |  |  |
| 4. ADEQUATE ALARM SYSTEM FOR POWER OR EQUIPMENT FAILURES AVAILABLE.   | ⊠s □m □u □na                     |  |  |  |  |  |  |  |
| 5. ALL NEEDED TREATMENT UNITS IN SERVICE  | ⊠s □ m □ u □ na                  |  |  |  |  |  |  |  |
| 6. ADEQUATE NUMBER OF QUALIFIED OPERATORS PROVIDED.   | ⊠s □ m □u □ na                   |  |  |  |  |  |  |  |
| 7. SPARE PARTS AND SUPPLIES INVENTORY MAINTAINED.   | ⊠s □m □u □na                     |  |  |  |  |  |  |  |
| 8. OPERATION AND MAINTENANCE MANUAL AVAILABLE. STANDARD OPERATING PROCEDURES AND SCHEDULES ESTABLISHED. PROCEDURES FOR EMERGENCY TREATMENT CONTROL ESTABLISHED. | ⊠y□n□na<br>⊠y□n□na<br>⊠y□n□na    |  |  |  |  |  |  |  |

| New Mexico Water Service Company – Rio Communities  | PERMIT NO. NM0027782   |
|---|--|
| SECTION C – OPERATIONS AND MAINTENANCE (CONT'D)   |  |
| 9. HAVE BYPASSES/OVERFLOWS OCCURRED AT THE PLANT OR IN THE COLLECTION SYSTEM IN THE LAST YEAR? IF SO, HAS THE REGULATORY AGENCY BEEN NOTIFIED? HAS CORRECTIVE ACTION BEEN TAKEN TO PREVENT ADDITIONAL BYPASSES/OVERFLOWS? | □ y ⊠ n □ na<br>□ y □ n ⊠ na<br>□y □ n ⊠ na  |
| 10.HAVE ANY HYDRAULIC OVERLOADS OCCURRED AT THE TREATMENT PLANT?  IF SO, DID PERMIT VIOLATIONS OCCUR AS A RESULT?   | □ y ⊠ n □ na<br>□ y □ n ⊠ na   |
| SECTION D – SELF-MONITORING   |  |
| PERMITTEE SELF-MONITORING MEETS PERMIT REQUIREMENTS.  M S M M U M NA (FURTHER EXPL DETAILS:   | ANATION ATTACHED <u>NO</u> ).  |
| 1. SAMPLES TAKEN AT SITE(S) SPECIFIED IN PERMIT.  | ⊠ y □ n □ na   |
| 2. LOCATIONS ADEQUATE FOR REPRESENTATIVE SAMPLES.   | ⊠ y □ n □ na   |
| 3. FLOW PROPORTIONED SAMPLES OBTAINED WHEN REQUIRED BY PERMIT.  | ⊠ y □ n □ na   |
| 4. SAMPLING AND ANALYSES COMPLETED ON PARAMETERS SPECIFIED IN PERMIT.   | ⊠ y □ n □ na   |
| 5. SAMPLING AND ANALYSES PERFORMED AT FREQUENCY SPECIFIED IN PERMIT.  | ⊠y □ n □ na  |
| 6. SAMPLE COLLECTION PROCEDURES ADEQUATE  | ⊠ y □ n □ na   |
| a) SAMPLES REFRIGERATED DURING COMPOSITING.   | ⊠ y □ n □ na   |
| b) PROPER PRESERVATION TECHNIQUES USED.   | ⊠ y □ n □ na   |
| c) CONTAINERS AND SAMPLE HOLDING TIMES CONFORM TO 40 CFR 136.3.   | ⊠ y □ n □ na   |
| 7. IF MONITORING AND ANALYSES ARE PERFORMED MORE OFTEN THAN REQUIRED BY PERMIT, ARE THE RESULTS REPORTED IN PERMITTEE'S SELF-MONITORING REPORT?   | □ y □ n ⊠ na   |
| SECTION E – FLOW MEASUREMENT  |  |
| PERMITTEE FLOW MEASUREMENT MEETS PERMIT REQUIREMENTS.    X S  | ANATION ATTACHED <u>NO</u> )   |
| PRIMARY FLOW MEASUREMENT DEVICE PROPERLY INSTALLED AND MAINTAINED.     TYPE OF DEVICE: Closed pipe  | ⊠y □n □na  |
| 2. FLOW MEASURED AT EACH OUTFALL AS REQUIRED.   | ⊠y□n □nA   |
| 3. SECONDARY INSTRUMENTS (TOTALIZERS, RECORDERS, ETC.) PROPERLY OPERATED AND MAINTAINED.  | ⊠ y □ n □ na   |
| 4. CALIBRATION FREQUENCY ADEQUATE. RECORDS MAINTAINED OF CALIBRATION PROCEDURES. CALIBRATION CHECKS DONE TO ASSURE CONTINUED COMPLIANCE.  | $\boxtimes$ Y $\square$ N $\square$ NA $\boxtimes$ Y $\square$ N $\square$ NA $\boxtimes$ Y $\square$ N $\square$ NA |
| 5. FLOW ENTERING DEVICE WELL DISTRIBUTED ACROSS THE CHANNEL AND FREE OF TURBULENCE.   | ⊠ y □ n □ na   |
| 6. HEAD MEASURED AT PROPER LOCATION.  | ⊠ y □ n □ na   |
| 7. FLOW MEASUREMENT EQUIPMENT ADEQUATE TO HANDLE EXPECTED RANGE OF FLOW RATES.  | ⊠ y □ n □ na   |
| SECTION F – LABORATORY  |  |
| PERMITTEE LABORATORY PROCEDURES MEET PERMIT REQUIREMENTS.   | ANATION ATTACHED <u>NO</u>   |
| 1. EPA APPROVED ANALYTICAL PROCEDURES USED (40 CFR 136.3 FOR LIQUIDS, 503.8(b) FOR SLUDGES)   | ⊠ y □ n □ NA   |

|  | PERMIT NO. NM0027782                            |                           |                         |                       |                      |   |          |  |  |  |  |  |
|--|---|---------------------------|-------------------------|-----------------------|----------------------|---|----------|--|--|--|--|--|
| SECTION F - LABORATORY (CONT'D)  |   |                           |                         |                       |                      |   |          |  |  |  |  |  |
| 2. IF ALTERNATIVE ANALYTICAL PROCEDURES ARE USED, PROPER APPROVAL HAS BEEN OBTAINED  |   |                           |                         |                       |                      |   |          |  |  |  |  |  |
| 3. SATISFACTORY CALIBRATION AND MAINTENANCE OF INSTRUMENTS AND EQUIPMENT.  |   |                           |                         |                       |                      |   |          |  |  |  |  |  |
| 4. QUALITY CONTR   | 4. QUALITY CONTROL PROCEDURES ADEQUATE.         |                           |                         |                       |                      |   |          |  |  |  |  |  |
| 5. DUPLICATE SAMPLES ARE ANALYZED. 10 % OF THE TIME.   |   |                           |                         |                       |                      |   |          |  |  |  |  |  |
| 6. SPIKED SAMPLES ARE ANALYZED % OF THE TIME.  |   |                           |                         |                       |                      |   |          |  |  |  |  |  |
| 7. COMMERCIAL LABORATORY USED.   |   |                           |                         |                       |                      |   |          |  |  |  |  |  |
| LAB NAME Hall Environmental Analysis Laboratory, Inc Sage Environmental Consulting   |   |                           |                         |                       |                      |   |          |  |  |  |  |  |
| LAB ADDRESS  | na City, OK 73116                               |                           |                         |                       |                      |   |          |  |  |  |  |  |
| PARAMETERS PERFORMED BOD; TSS; E. coli Biomonitoring   |   |                           |                         |                       |                      |   |          |  |  |  |  |  |
| SECTION G - EFI  | FLUENT/RECEIVIN                                 | G WATERS OBSER            | VATIONS.                | s □ m □ u □ NA        | (FURTHER EXPLANATIO! | N ATTACHED <u>NO</u> ).                         |          |  |  |  |  |  |
| OUTFALL NO.  | OIL SHEEN                                       | GREASE                    | TURBIDITY               | VISIBLE FOAM          | FLOAT SOL.           | COLOR   | OTHER    |  |  |  |  |  |
| 001  | NONE  | NONE                      | SOME                    | NONE                  | NONE                 | MUDDY   |          |  |  |  |  |  |
|  |   |                           |                         |                       |                      |   |          |  |  |  |  |  |
|  |   |                           |                         |                       |                      |   |          |  |  |  |  |  |
| RECEIVING WATER OBSERVATIONS: The Spring run off continues and the Rio Grande at discharge 001 is extremely high and turbid.   |   |                           |                         |                       |                      |   |          |  |  |  |  |  |
| SECTION H - SLUDGE DISPOSAL  |   |                           |                         |                       |                      |   |          |  |  |  |  |  |
| SLUDGE DISPOSAL MEETS PERMIT REQUIREMENTS.  SLUDGE DISPOSAL MEETS PERMIT REQUIREMENTS.  SLUDGE DISPOSAL MEETS PERMIT REQUIREMENTS.  SLUDGE DISPOSAL MEETS PERMIT REQUIREMENTS. |   |                           |                         |                       |                      |   |          |  |  |  |  |  |
| 1. SLUDGE MANAC  | SEMENT ADEQUATE TO                              | O MAINTAIN EFFLUEN        | IT QUALITY.             |                       |                      | $\boxtimes$ s $\square$ M $\square$ U $\square$ | <br>] na |  |  |  |  |  |
| 2. SLUDGE RECORI   | DS MAINTAINED AS RE                             | EQUIRED BY 40 CFR 50      | 03.                     |                       |                      | ⊠s□м□u□   | <br>] na |  |  |  |  |  |
| 3. FOR LAND APPL   | IED SLUDGE, TYPE OF                             | LAND APPLIED TO: <u>S</u> | Surface Disposal Site ( | e.g., FOREST, AGRICUL | TURAL, PUBLIC CONTA  | ACT SITE)                                       |          |  |  |  |  |  |
| SECTION I - SAM  | MPLING INSPECTIO                                | ON PROCEDURES             | (FURTHER EXPLANATIO     | N ATTACHED).          |                      |   |          |  |  |  |  |  |
| 1. SAMPLES OBTAI   | NED THIS INSPECTION                             | 1.                        |                         |                       |                      | □y □n [   | ⊠ NA     |  |  |  |  |  |
| 2. TYPE OF SAMPLE OBTAINED   |   |                           |                         |                       |                      |   |          |  |  |  |  |  |
| GRAB COMPOSITE SAMPLE METHOD FREQUENCY   |   |                           |                         |                       |                      |   |          |  |  |  |  |  |
| 3. SAMPLES PRESERVED.  |   |                           |                         |                       |                      |   |          |  |  |  |  |  |
| 4. FLOW PROPORT  | 4. FLOW PROPORTIONED SAMPLES OBTAINED.          |                           |                         |                       |                      |   |          |  |  |  |  |  |
| 5. SAMPLE OBTAIN   | NED FROM FACILITY'S                             | SAMPLING DEVICE.          |                         |                       |                      | $\square$ Y $\square$ N [                       | □ NA     |  |  |  |  |  |
| 6. SAMPLE REPRES   | ENTATIVE OF VOLUM                               | E AND MATURE OF DI        | ISCHARGE.               |                       |                      | □у□п[   | □ NA     |  |  |  |  |  |
| 7. SAMPLE SPLIT W  | /ITH PERMITTEE.                                 |                           |                         |                       |                      | □y □n [   | □ NA     |  |  |  |  |  |
| 8. CHAIN-OF-CUST   | 8. CHAIN-OF-CUSTODY PROCEDURES EMPLOYED.        |                           |                         |                       |                      |   |          |  |  |  |  |  |
| 9. SAMPLES COLLE   | 9. SAMPLES COLLECTED IN ACCORDANCE WITH PERMIT. |                           |                         |                       |                      |   |          |  |  |  |  |  |

# **Compliance Evaluation Inspection New Mexico Water Service Company Rio Communities Wastewater Treatment Facility** NPDES permit No. NM0027782

Inspection Date: June 4, 2019

#### **INTRODUCTION**

A Compliance Evaluation Inspection (CEI) was conducted at the Rio Communities Wastewater Treatment Plant (WWTP) on June 4, 2019 by Sandra Gabaldón and Daniel Valenta of the State of New Mexico Environment Department (NMED), Surface Water Quality Bureau (SWQB). This facility is a private domestic wastewater treatment facility classified under the federal Clean Water Act (CWA), Section 402 National Pollutant Discharge Elimination System (NPDES) permit program and is assigned NPDES permit number NM0027782. The facility design flow is 0.3 million gallons per day (MGD).

The Rio Communities discharges into the Rio Grande Basin in Segment 20.6.4.105 (NMAC State of New Mexico Standards for Interstate and Intrastate Surface Waters). Designated uses include: Irrigation, marginal warmwater aquatic life, livestock watering, public water supply, wildlife habitat and primary contact.

The inspectors arrived at Rio Communities at 1140 hours and conducted an entrance interview with Mr. Byron Peters, Certified Operator. The inspector made introductions, presented her credentials and discussed the purpose of the inspection with Mr. Peters. An exit meeting was held with Mr. Peters at the facility at approximately 1300 hours. Ms. Gabaldón explained to Mr. Peters the preliminary findings of the inspection and requested records for review.

The NMED performs a specific number of CEI's annually for the United States Environmental Protection Agency (USEPA). The purpose of this inspection is to provide the USEPA with information to evaluate the permittee's compliance with their NPDES permit. The enclosed inspection report is based on verbal information supplied by the permittee's representatives, observations made by Ms. Gabaldón, and a review of records maintained by the permittee, commercial laboratory, and/or NMED. Findings of the inspection are detailed in the attached EPA form 3560-3 and in the narrative further explanations section of the report.

#### TREATMENT SCHEME

The Rio Communities WWTP serves a population of approximately 2000. Currently, the treatment plant design flow is 0.3 MGD. Wastewater influent enters the facility via three lift stations. It proceeds through a barscreen and enters a grit chamber. Debris from the headworks is collected into an on-site dumpster and disposed of at the landfill.

Wastewater then enters a wet well with two screw pumps and two submersible pumps. Next, the wastewater enters the aeration basin where it then proceeds to the clarifier. The effluent is disinfected prior to discharge by ultraviolet lights.

#### **SLUDGE MANAGEMENT**

Waste activated sludge (WAS) is sent to the sludge holding basin on a daily basis and then sent to a centrifuge for removal of decant. The sludge is then placed into a dumpster and is later transported to the landfill for final disposal. The decant from the sludge is sent back to the headworks for further treatment.

# Compliance Evaluation Inspection Rio Communities NPDES Permit No. NM0027782

Inspection Date: June 4, 2019

#### **FURTHER EXPLANATIONS:**

Note: The sections are arranged according to the format of the enclosed EPA inspection checklist (Form 3560-3), rather than being ranked in order of importance.

#### Section C - Operations and Maintenance - Overall Rating of "Marginal"

In Part III.C.3, Proper Operation and Maintenance:

- a. The Permittee shall at all times property operate and maintain all facilities and systems of treatment and control (and related appurtenances) which are installed or used by the permittee as efficiently as possible and in a manner which will minimize upsets and discharges of excessive pollutants and will achieve compliance with the conditions of this permit. Proper operation and maintenance also include adequate laboratory controls and appropriate quality assurance procedures. This provision requires the operation of backup or auxiliary facilities or similar systems which are installed by a permittee only when the operation is necessary to achieve compliance with the conditions of this permit.
- b. The permittee shall provide adequate staff which is duly qualified to carry out operation, maintenance and testing functions required to insure compliance with the conditions of this permit.

#### **<u>Findings</u>** for Operations and Maintenance:

Facility preventive maintenance directly affects the ability of the facility to run efficiently and to comply with its NPDES permit.

Preventive Maintenance planning and scheduling are essential to keep the plant in compliance with this permit and to maintain the useful life of equipment.

On this day, it was apparent that the operator had not maintained the clarifier, see photo #1, 2.

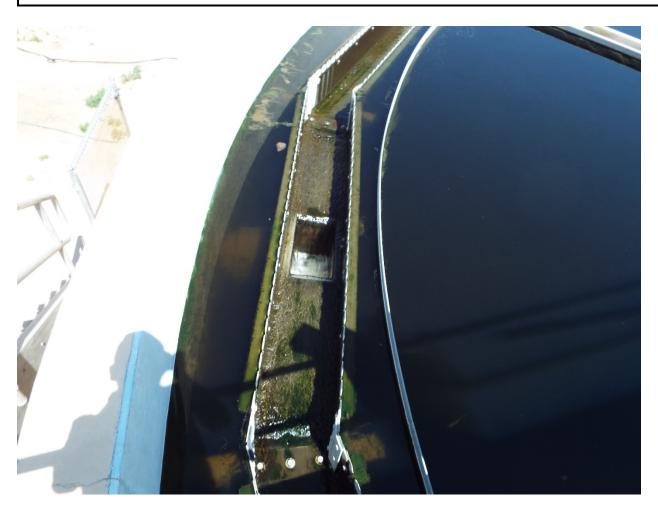
The ultraviolet channel was also in need of some maintenance, see photo #3, 4.

New Mexico Water Service Company / Rio Communities Wastewater Treatment Facility

City/County: Tome / Valencia State: New Mexico

Location: Rio Communities

Subject: Clarifier

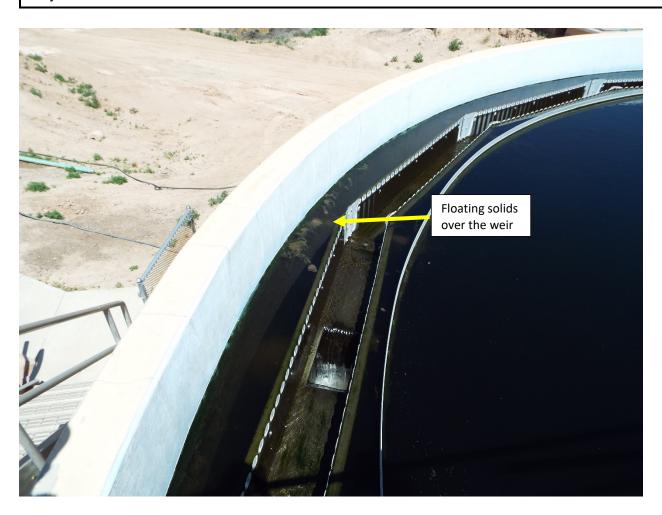


New Mexico Water Service Company / Rio Communities Wastewater Treatment Facility

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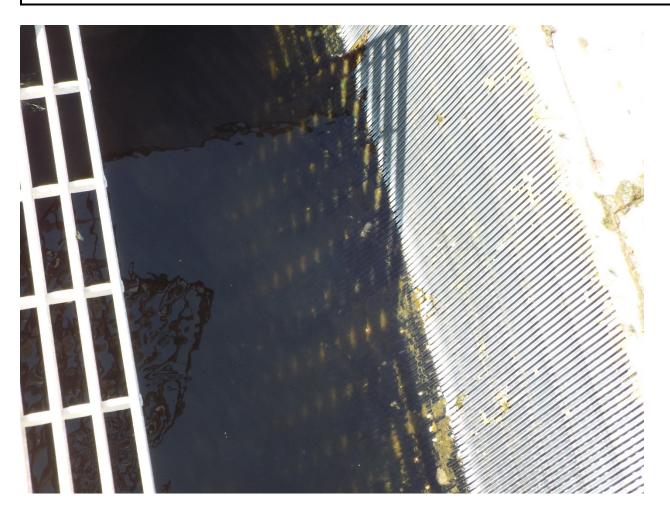


New Mexico Water Service Company / Rio Communities Wastewater Treatment Facility

City/County: Tome / Valencia State: New Mexico

Location: Rio Communities

Subject: Ultraviolet Channel



New Mexico Water Service Company / Rio Communities Wastewater Treatment Facility

City/County: Tome / Valencia State: New Mexico

Location: Rio Communities

Subject: Ultraviolet Channel

